PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number 10/046629

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			Colun	(Column 1)		(Column 2)		TYPE		OF		ENTITY
╟							RATE	FEE	_	RATE	FEE	
FOR			NUMBE	NUMBER FILED		BER EXTRA		BASIC FE	E 370.00	OF	BASIC FEI	740.00
TOTAL CHARGEABLE CLAIMS			71-1	/i - minus 20=		Ψ		X\$ 9=	1	OF	X\$18=	
INDEPENDENT CLAIMS ·				ninus 3 =	*			X42=	1	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRES								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter *					"0" in	column 2	1	TOTAL	+	OR		
CLAIMS AS AMENDED - PART II									4	-4	OTHER	
,		(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	15	Minus	- 6	30	=		X\$ 9=		OR	X\$18≥	
	Independent	1· 2	Minus	***	<u>3</u>	=		X42=		OR	X84=	
نا	THIST PHES	ENTATION OF M	OLTIPLE DE	PENUENI	CLAIM	 !	•	+140=		OR	+280=	•
							L	TOTAL			TOTAL	
		(Column 1)		(Colum	n 2)	(Column 8)	Α	DDIT. FEE] ••••	ADDIT. FEE	
		CLAIMS		HIGHE	ST		Г		ADDI-	T I		ADD!-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total		Minus	44		= ·		X\$ 9=		OR	X\$18=	Ī
	Independent	<u> -</u>	Minus	***		=	T	X42=		OR	X84=	
Ľ.	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT	CLAIM			+140=		OR	+280=	
				. :		•	L	TOTAL	· ·	OR	TOTAL	
							AL	DOIT. FEE	<u> </u>		VDDIT. FEEL	
-		(Column 1).		(Colum HIGHE		(Column 3)	_					4001
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	¢	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	1	X42=		ŀ	X84=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	-		OR		
+140= A OR +280=												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the entry in column 1 is less than 1 is less than 20, enter "20." **If the entry in column 1 is less than 1 is less than 3.										TOTAL DDIT. FEE		
T	The "Highest Num The "Highest Numi	nber Previously Pai ber Previously Paid	d For IN THIS For (Total or	5 SPACE is I Independent	ess than) is the t	3, enter 3." lighest number (· 	opriate box			